

AANA 2001-2004



2001 – M. Mike Malek, MD

Versions of the AANA coding manual on CD-ROM were distributed to members of the AANA Executive Committee for their evaluation. The CCS (Community Consulting Services) Fundraising Group was engaged to direct a fundraising campaign for AANA. A formal kick off for the campaign was planned for the 2001 Annual Meeting.

An Educational Overview Taskforce was formed and charged with assessing all of the AANA CME activities as well as assessing the educational needs of the AANA membership. He recommended that William A. Grana, MD chair this task force.

The Funding Raising Campaign named the “Building on Excellence Campaign” (BOE) opened with a flourish at the 2001 Annual Meeting. Specialty Day 2001 welcomed 1,432 participants to the AANA session. This was the largest attendance at any AANA function in the history of the association.

Fourteen AANA courses were held at the OLC in 2000. All in all, 480 participants were in attendance at these courses. In all, AANA awarded \$75,171.00 in research grants to four grant petitioners in 2001. The feasibility of producing “at a distance learning” opportunities was discussed for the first time.

M. Mike Malek, MD assumed the Presidency at the 2001 Annual meeting. He stated that he was determined to see the continuation of AANA meeting the goals and objectives or our stated mission of education in the field of arthroscopic surgery. He expressed a desire to see that the fund raising goal is successful and intended to make it a high priority. He planned on continuing to make membership development an important issue on his agenda.

Dr. Jennings reported that the journal would have a new and more attractive cover starting with the first issue in 2002. As of August 2001, AANA had received \$3,075,000.00 in corporate pledges from 11 companies in the Building on Excellence (BOE) campaign.

The Archives Committee of AANA was charged with producing a digital archival presentation which would achieve the goal of describing the origin and growth of arthroscopic surgery in North America. Website submission of abstracts became a reality in 2001. The process was more efficient and faster. The development of a new database program made this possible.

A combined course with the American Orthopaedic Foot and Ankle Society was approved for 2002. This represented the first time AANA had combined with another subspecialty orthopaedic association in producing a CME accredited course. AANA made a decision in 2001 to produce resident courses for a markedly reduced fee. It was intended to do one resident course yearly.

Dr. Grana reported that the Task Force on Educational Overview held a conference call as their first meeting. The make up of this task force became the Chairperson plus the Chair of the Education Committee, The Chair of the Learning Center Committee, and the current and past Program Chairs. In addition, The Executive Vice President, and necessary staff will be present at their anticipated meetings. The task force produced a mission statement, which was entered into the minutes of AANA Executive Committee Meeting of August 2001. AANA passed a motion to provide Past Presidents who have achieved Emeritus Membership status a complimentary subscription to the *Journal of Arthroscopy*. In 2001, the JBOT made a decision to eventually add an additional member to the Board. That member would represent ISAKOS on the JBOT.

Major upgrades were needed to the OLC including a new HVAC system and increased square footage for better storage. The original estimated cost for these upgrades was \$1,000,000.00. AANA agreed to cost share the expenses with AAOS and the OLC on an equal basis. As of November of 2001, the Building on Excellence campaign pledges had reached \$4,700,000.00.

The AANA BOD authorized up to \$10,000.00 to be budgeted for the production of a broadcast of a live surgical case from San Antonio to the OLC. The purpose of this effort was to test the hardware and to check the reaction to participants at the OLC. The 2001 Fall Course was an all computer presentation meeting. No videotapes were used. From this point in time, it was intended to use only digital presentations for all AANA CME presentations.

The AANA arthroscopic coding manual was completed and was up and running by the time of the 2001 Fall Course. Prior to this time portions of this manual were posted but by this time it was complete. The shocking historical fact that the USA was attacked on September 11, 2001 came to us all as a reality check. The AANA was forced to cancel two Learning center courses due to the attack and the disruption to travel and the restrictions applied. There were a total of 435 registrants for AANA Learning Center courses during 2001.



2002 - Stephen S. Burkhart, MD

A letter was received from Joseph Zuckerman, MD the OLC board chairman thanking AANA for the assurance that AANA gave the OLC that they would share in the expenses of the necessary construction upgrades. There had been no hard estimation of those costs as yet, but estimates would be forthcoming some time in the summer of 2002.

The construction firm of Reed Illinois was engaged to perform the reconstruction to the OLC. The estimated cost of the entire project was \$919,845.00. AANA approved the payment of up to \$306,615.00 as their share of the costs.

AANA granted approval to the AAOS to use AANA produced teaching videos online in the AAOS OKU section of the AAOS website. Guarantees were given to AANA that none of the materials would be used for proprietary purposes. The attendance at the 2002 Annual Meeting was just over 1000 participants. Stephen S. Burkhart, MD assumed the presidency. In spite of the September 11, 2001 terrorist attack on our country, the 2001 Fall Course met its budgetary expectations and was well attended. Specialty Day 2002 had 998 attendees at the AANA meeting. AOSSM had an attendance of 882 at their meeting by comparison.

CPT coding seminars were added to the 2001 and 2002 Annual meetings and were quite well attended and received high marks from the participants. Focus “Demos” which had been presented the last several years at the meeting were extremely popular. One hundred percent of participants surveyed wanted the focus demos to be continued. The “Alex” lab course was tried in 2001 for the first time. It was extremely popular and well received. It will be continued in the future. AANA presented a shoulder symposium at the 2002 SICOT meeting held in San Diego. This symposium was arranged by Education Chairman Richard K. N. Ryu, MD. Drs. Tasto, Esch, Fisher, Pedowitz and Ryu all presented at this symposium.

The American Orthopaedic Association (AOA) presented a meeting on voluntary association leadership and governance issues. AANA members and staff including Edward A. Goss, J. Whit Ewing, MD, Walter R. Shelton, MD, Stephen S. Burkhart, MD, and Gregory C. Fanelli, MD attended this meeting. The meeting was sponsored by AOA and designed and facilitated by Teckner Consultants. The meeting was considered by all to be valuable and worthwhile attending. The points made at the meeting were designed to give the participant better insight into what it takes to keep a voluntary association progressive and functional enough to deal with changing needs.

Stephen S. Burkhart, MD planned to perform a shoulder procedure in San Antonio, and have the procedure broadcasted live to the OLC in August of 2002. Physicians attending a course that weekend were invited to come a day sooner and take part in the interactive process. This was to be a first for AANA utilizing this tantalizing technology.

Dr. Walter Shelton the Chairman of the Development committee reported that the Building on Excellence (BOE) fund raising campaign was a complete success. AANA received pledges for \$5,398,000.00. These cash gifts were scheduled to be received in allotments through 2006. Total expenses for the operation of this campaign amounted to \$530,748.00.

AANA developed a plan to begin 3 month follow up surveys of Learning Center Course participants in order to determine the effect that attendance at the course had on the participant's practice.

The 2002 Annual Meeting was held in Washington D.C. M. Mike Malek, MD chaired the meeting. Stephen S. Burkhart, MD was introduced as the incoming President at this meeting. There were 80 podium speakers at the 2002 Annual meeting. For the second year, the scientific posters were being presented electronically. Four computer terminals were used in the poster area to accomplish this task. The attendance at this Annual meeting topped 1000 again.

M. Mike Malek, MD and Brian Day, MD selected by Dr. Malek, will represent AANA at the World Council on Sports Medicine in Athens Greece in 2004. A decision was made to publish all the issues of "Pearls" on the AANA website. A new course was offered to participants of AANA Learning Center courses. This was a course on practice management chaired by Jack Bert, MD.

Dr. Burkhart reported that a transmission of live surgery from San Antonio to a course being held in San Diego went well and was technically excellent. The first trial of this technique to the OLC was scheduled for later in the year. It was noted at the fall 2002 BOD meeting that Mr. Don Reid had passed away. Mr. Reid had served AANA as the former Executive Director and fund raising coordinator.

A new contract with the publisher (Elsevier) had been agreed to. Elsevier had earlier purchased the Saunders Publishing House. A contract was prepared by AANA to offer to ISAKOS. The purpose of the contract was to create a relationship between the organizations that would in essence make the Arthroscopy Journal the official journal of both associations for at least eight years.

In the summer of 2002, the Finance Committee of AANA made the decision to seek a new fund manager to oversee the investments of AANA. A search was carried out and three recognized investment firms in the Chicago area were invited to make a presentation. The three companies consulted included Solomon Smith Barney, Merrill Lynch, and Morgan Stanley. The Finance committee eventually selected Merrill Lynch to oversee the management of the invested funds of AANA. The BOD worked with Merrill Lynch to develop an investment policy. This policy recognized the importance of establishing the level of risk that would be tolerated and was put into place.

The OLC renovation was completed without cost over-runs. The OLC decided to offer at a distance learning capabilities to their menu of services. The OLC appointed James P. Tasto, MD as a member of the OLC BOD.

The Educational Review Task Force reviewed the AANA and the AANA CME Mission Statements. The task force made recommendations for some minor changes to the mission statements. The BOD accepted these changes.

The BOD budgeted \$100,000.00 for use in AANA OLC resident's courses in 2004. These funds were to come from the Education Fund. The Education Fund was created from the monies obtained through the BOE campaign. The reason for carrying out the fund raiser was to support educational opportunities such as the resident courses. Three named scholarships were created from the funds raised in the BOE campaign. These scholarships named the Smith Nephew, Health South and Wyeth scholarships consisted of an all expenses paid attendance to an AANA OLC course of the winner's choice. There were two resident learning center courses planned for 2004

The e-posters are planned again for the next Annual Meeting in 2003. In an attempt to avoid delays at the computer terminals, each participant at the meeting will receive a CD-ROM in pdf. Format containing all the posters. The BOD created a budget for allowing up to \$15,000.00 not including expenses for a Presidential speaker.



2003 - Brian Day, MD

A new contract of agreement between ISAKOS and AANA was prepared for signature in January 2003. This contract will officially have the Journal of Arthroscopy continue to be the official journal of both associations once signed. The AANA BOD made a decision to limit the term of the JBOT Chairman to 2 years with a one-time term renewal possibility. This decision was referred to the Bylaws Committee and eventually was passed by the membership and became the official policy of the association.

The BOD merged the Data Analysis and Retrieval committee into the Electronic Media Committee thus doing away with the Data Analysis and Retrieval Committee. The newly reconstituted committee was named the Electronic Data and Media Committee. Ultimately, this committee was renamed the Technology Committee.

The Fellowship Committee had finished the core curriculum for arthroscopy fellowships and presented a draft of the curriculum to the BOD for approval. The AANA BOD passed a motion to receive the draft of the arthroscopy core curriculum as the official core curriculum for AANA recognized fellowships. The BOD congratulated John C. Richmond, MD, Chair of the Fellowship Committee, for completing this task.

William R. Beach, MD, Chairperson of the Health Policy and Practice Committee, informed the AANA BOD that his committee was impressed by the new philosophy exhibited in the changes to the AAOS Global Services Data Book. There seemed to be recognition of the complexities of arthroscopic surgical procedures that had hitherto been lacking. The sense of the Committee was that the AANA CPT Manual which had been up on the AANA website for one year was in need of being updated. With the recognition of the AANA viewpoint exhibited by AAOS it was now felt that AANA could remove the AANA CPT Coding Manual from the AANA website and refer Orthopaedists to the AAOS website for responses to queries regarding coding issues. The removal of the AANA CPT coding manual from the AANA website was approved by the AANA BOD.

Stephen S. Burkhart, MD expressed his opinion that the Task Force on Educational Overview had significant lasting value to AANA. He was of the opinion that this task force started by James C. Esch, MD should be made a standing committee of AANA. A motion to convert the Task Force on Educational Overview into the Educational Overview Committee of AANA was passed.

The 2003 AANA Annual Meeting was held at the Marriott Desert Ridge Resort in Phoenix, AZ. President Stephen S. Burkhart, MD presided over this meeting. Brian Day, MD was inaugurated as the incoming President at the meetings conclusion. In Dr. Burkhart's opening remarks, he stated the he was pleased that AANA had achieved the goals he had outlined at the beginning of his year as President of AANA. These goals included:

- Progress in the at a distance learning opportunity being afforded by the OLC with the OLC BOD making the decision to purchase the necessary hardware to carry out this new technology.
- The addition of self-assessment evaluation for AANA courses at the Learning Center.
- The completion of new Patient Education materials.
- The development of new teaching opportunities with the addition of the practice management courses.

The AANA BOD made a decision to waive annual dues to members who were called to active duty from the reserves. This excuse from dues was intended to last as long as the member remained on active duty. The OLC upgrades functioned well since the completion of the work. AANA's share of the costs amounted to \$283,936.18. The OLC BOD and the AAOS BOD contributed a like amount to the total cost. All committee functions were reviewed in the past year as was suggested in 2000 as a priority item. All committees were informed of the changes to their committee charges.

As of March 2003, a total of \$1,623,561.00 had been collected from the pledges given during the active phase of the BOE campaign. \$3,738,260.00 remained to be collected by the end of 2006.

A conscious decision was made by Gary G. Poehling, MD, the Editor of *Arthroscopy*, to favor articles that were prospective in nature and had significant scientific merit. This type of article increases the impact factor rating of the journal. Royalty income from the journal for 2002 amounted to a net-net profit of approximately \$460,000.00.

William D. Grana, MD, Chairperson of the Educational Overview Committee, informed the BOD that the ACCME had informed member constituents that stronger emphasis would be placed on standards for commercial support for educational venues. These are the standards to ensure the separation of promotion from education within the CME activities of ACCME accredited providers. The outline of these standards involved five themes: 1) Independence; 2) Absence of commercial bias; 3) Disclosure of required information and relationships; 4) Appropriate management of funds from commercial interests; and 5) Appropriate management of advertising and exhibits.

As a result of the discussion generated by this information from ACCME, a motion was made and passed to remove CME credit for attendance at the Fall Course "Focus Demos". The reason for this decision was that commercial interests play a large role in the production of the Focus Demos. (This decision was to play a large role in the ACCME on site review that AANA underwent in December of 1994.)

Robert W. Jackson, MD requested that the BOD accept his decision to resign as Chairperson of the Archives Committee that he so capably chaired for so long. The BOD reluctantly did accept Dr. Jackson's resignation from this post with an agreement that he would remain on the committee as a member. John B. McGinty, MD accepted the appointment as the new Chairperson of the Archives Committee. Dr. McGinty announced his intention to have the Archives Committee produce a monograph covering the history of Arthroscopy and the history of the Arthroscopy Association of North America.

The 2002 Fall Course drew 511 participants. By comparison, there were 377 participants in the 2001 Fall Course. AANA Specialty day 2003 drew 1461 participants. This was the largest enrolment of any Specialty Courses offered at the AAOS meeting. Private tutorials were added to the menu of offerings for the 2003 Fall Course. The intent was to allow a single participant to spend several hours on a procedure specific cadaver experience paired with a recognized surgical expert. The results were such that this was carried over to the 2004 course as well.

AANA once again applied for a two (2) hour ICL (Instructional Course Lecture) to be delivered at the 2004 AAOS meeting. Once again, the AANA ICL application was denied. Seventeen AANA courses were offered overall at the OLC in 2002. These courses involved 37 Master Instructors and were attended by 616 surgeon participants. Only 2 knee courses were planned for 2004. Both courses will be comprehensive in nature. There were two resident courses planned for 2004. These courses would provide \$1100.00 scholarships for each resident participant. Once again, these scholarships were made possible by monies gained through the BOE campaign.

A \$100.00 increase to the fee for attendance by a non-member of AANA at a Learning Center course was imposed. It is noteworthy that since inception, no increase in fees for courses at the OLC has been imposed on AANA member participants. One hundred and two (102) members joined AANA in 2003. E Posters on CDs were given to each participant at the 2003 Annual Meeting. More than 800 participants attended the 2003 Annual meeting. Eighty-three (83) podium presentations were given at the 2003 Annual Meeting. No Richard O'Connor Research Award was given in 2003 due to the fact that the Research Committee did not feel there were any applications worthy of the award.

Brian Day, MD discussed his goals for the upcoming year. He remarked that he wished: 1) To continue Dr. Burkhardt's initiative on distance learning; 2) To encourage relationships with related societies; 3) To continue AANA's role as leader in the use of information technology and new technology in education; 4) To assign specific 12 month goals to committees; 5) To do a pilot project on videoconferencing; 6) To have AANA consider the production of a Winter Resort Course.

The Healthsouth pledge to the BOE campaign was lost after having received 20% of the pledged \$1,000,000.00. The Healthsouth business structure is under review and there was doubt that any additional funds will be forthcoming. A contract with MCJ was signed for services through the 2005 Fall Meeting.

The virtual reality project that AAOS is working on and that AANA agreed to support is making only slow progress at this point. AAOS had not as yet requested any of the \$25,000.00 that AANA budgeted several years ago for this project. W. Dilworth Cannon, MD, AANA Past President, had worked with this project for years and has kept AANA informed of the progress.

An Information Technologist was engaged by AANA to work mainly on a redesign of the website at this point in time. His name is Ugo Saettone. He was to be used as a part time employee for the present time.

Journal subscriptions had risen to 5,126 subscribers. The journal subscription cost to a member was increased from \$85.00 to \$90.00 per year at this time. The journal was scheduled to increase to 12 issues plus a supplement by 2005. There had been a delay in the signing of the final contract with ISAKOS and AANA regarding the journal relationship. Dr. Day will sign the final version of the contract once it has been signed by Dr. Per Renstrom (President of ISAKOS).

At the request of the communications Committee, all Past Presidents will in the future be given a PAST PRESIDENT ribbon to be attached to their name tag when attending AANA functions. J. Whit Ewing, MD was signed to another contract to remain as the Executive Vice President until July 2006.

The Fellowship Committee planned to have fellowship posters at the 2004 Annual meeting. These posters were to be analog posters on easels to promote face-to-face discussions with authors. An award for best poster was to be granted by the Fellowship Committee who was to select the winner. The hip arthroscopy course was oversubscribed prompting the decision to hold two hip courses the next year instead of one.

Concern was expressed by a number of BOD members that committee meetings were not attended as well as they should have been. A motion was passed that committee attendance at committee meetings will be recorded on the AANA database.

Dr. Day introduced his proposal of AANA hosting a CME course at a major ski resort during the winter season. Specifically, he wished to have a course arranged in January or February of 2005 to be held at Whistler Resort. The nature of the course would be left to the discretion on the Education Committee. This course would be planned for approximately 200 participants.

In the Fall of 2003, President Day informed all that he made the decision to form a presidential task force charged with the task of developing a strategy for the continued operation of the motor skills portion of the AANA Fall Course and the AANA Learning Center courses. This task force was to be chaired by Donald H. Johnson, MD. Members assigned to join Dr. Johnson on the task force included James C. Y. Chow, MD the sitting chairperson of the Education Committee, the sitting Chairperson of the Learning Center Committee, J. Whit Ewing, MD, AANA Executive Vice President, and Mr. Edward Goss, Executive Director. The BOD empowered Mr. Edward Goss to seek and employ another staff person to fill the position of Assistant Director of Meetings.

At last, all necessary parties signed the contract between ISAKOS and AANA regarding the Journal being the official journal of both associations. Both associations look forward to a long and fruitful relationship. Ms. Holly R. Albert attended an ACCME workshop in Chicago in December of 2003. This was done in an effort to assist AANA in preparation for the ACCME on site visit for purposes of re-accreditation to be carried out in late 2004.

AANA received information from the OLC BOD of their intention to hopefully no longer be in need of supplemental support from AANA and/or AAOS by the end of 2006. In the meanwhile, AANA will support the OLC with \$85,000.00 in 2004. AANA will be asked to continue to support the OLC with \$20,000.00 capital funding annually for an indefinite period of time. AANA strengthened its disclosure statements as it was felt that the ACCME would be paying close attentions to this element by the time of the review. AANA is requesting that every committee request any changes in any committee member disclosure statement at every meeting. Every member of the BOD will be asked to disclose any changes to their statement at every meeting as well.

The AANA Archives Committee made the decision to place the proposed history of AANA and Arthroscopy on the AANA website rather than prepare a printed and bound book. It was felt that in this way, the history could be added to as a work continually in progress. If at anytime, someone decided to print the document as a bound volume, it could easily be accomplished. A two-year goal was established for completion of the project.

There were 450 registrants for the 2003 Fall Course. There were 17 scheduled "Focus Demos". AANA granted six (6) scholarships for trainees of the Global Arthroscopy Association. This request for scholarships to a meeting at the OLC came from Past AANA President Howard J. Sweeney, MD. AANA elected to support this effort. The monies will come from donations received by AANA through its association with OREF.



2004 – Donald H. Johnson, MD

The AANA Executive Committee met at La Quinta, CA in February 2004. Brian Day, MD chaired the meeting. The BOD decided to change the bylaws covering Emeritus membership. Their intention was to allow any member with at least 10 years of membership to change to Emeritus status once they reached the age of 65 regardless of whether or not they were still practicing medicine. This was eventually voted in by the membership.

Stephen S. Burkhart, MD was recommended to the OLC BOD to fill an upcoming vacancy on the OLC BOD. Total Assets at 2003 years end amounted to \$7,478,865.00. There had in the past been questions raised concerning the publication "Pearls". While popular with our membership, Pearls is not a refereed journal. There was concern that perhaps AANA might be considered responsible for the suggested modes of treatment and surgical procedures presented in Pearls. AANA has since the inception of Pearls covered it with a disclaimer. It had been recommended that AANA have our legal consultants review the disclaimer. This was carried out and the professional opinion was that AANA was sufficiently covered by the existing disclaimer.

Mr. Goss had been instructed to search out possible alternative sites for the AANA office. The coming year was the renewal of the leasing contract with the AAOS, the site of the existing office. Mr. Goss did a thorough search of the Rosemont area and adjoining areas and was not able to find any office space that would come within \$10.00/sq. /ft. of the existing space. There was no decision to move from the existing space.

A Founding Member luncheon was arranged at the 2004 Annual meeting. Speaking at that luncheon were representatives from Merrill Lynch. They spoke on the topics of pension plan management and alternative plans for retirement. There was no fee to the members attending and they seemed to enjoy this effort.

Total course registration for the 2003 Fall Course was 480 participants. Thirteen of eighteen focus demos were fully subscribed. The socio-economic/CPT coding seminar was fully subscribed. The Instructional Course Lecture content from the 2003 Annual Meeting was published. The comments on this supplement were nothing but encouraging.

Richard K. N. Ryu, MD was complimented on performing an excellent job during his period of chairing the Education Committee. Richard L. Angelo, MD will be taking over as Chairman of the Education Committee at the next Annual Meeting. Dr. Angelo is already at work determining course content for the upcoming winter meeting in January 2005. Vipool (Vic) Goradia, MD is at work on upgrading the AANA website. He is hopeful of having the major part of this task accomplished by mid 2004.

The Executive Committee passed a motion to create a Presidential fund to be used by the President for AANA related activities. The amount of this fund was not to exceed \$50,000.00. The fund was to be subject to review and audit by the AANA Treasurer.

The 2004 Annual Meeting was convened at the Marriott World Center in Orlando, FL in April 2004. Brian Day, MD presided over the meeting. Donald H. Johnson, MD was inducted as the new President of AANA at meetings end. Dr. Day informed the BOD that he had formed a President's Council at the preceding February Executive Committee meeting in LaQuinta, CA. The council consists of five people, namely the Presidential line. This council met again just prior to the BOD meeting. The purpose of the Council is to discuss the agenda of the meeting and to keep the incoming and past Presidents up to date on issues concerning the association. It was felt that by doing this informally, the incoming presidents might well be better prepared for the time when they assume the office of President.

Dr. Day had requested, in advance of the Annual Meeting, that each BOD member would submit to him names of International Orthopaedists whose interests dwelled on arthroscopy and sports medicine. The purpose of this was that from the list of names submitted, there might well be some who were worthy of being selected for Honorary Membership in AANA. As a result of this action, the BOD moved and passed a motion to offer Honorary Membership in AANA to some sixty-six (66) individuals. Letters were to be mailed to these individuals offering this Honorary Membership to them.

The March 31, 2004 combined balance sheet revealed total assets of \$8,774,214.17. Of this amount, \$3,522,843.18 was the amount in the Education Fund. ISAKOS realized a \$40,000.00 royalty payment from the journal. In addition, AANA paid a \$50,000.00 education grant to ISAKOS, which was agreed upon by contract.

Article submissions were at an all time high in 2003. Over 50% of these submissions were from International sources. For this reason, the JBOT made the decision to boost the number of issues to 12 per year. This increase was to take place in 2005. The circulation in 2003 amounted to 5,479. Due to the increase of issues as well as the publication of a supplement, an increase in the journal subscription rate to AANA and ISAKOS members was approved. The rate in 2005 was to increase from \$90.00 to \$100.00.

Mr. Goss explained to the BOD that he had engaged a floor space planner to aid in better utilization of the space at the AANA office. There was also a serious need for an upgrade to the existing furniture, which was outdated having been originally, purchased as used furniture. A new five-year lease for the office space was signed. The space was leased for \$16.00/sq. ft.

The Educational Overview Committee reported that they were working to prepare for the ACCME review later in the year. A written report covering all the elements in the review process was due at the ACCME office by September 17, 2004. Dr. Grana felt that there would be no difficulty in meeting this deadline.

The Development Committee reported that they had covered the first resident's scholarship funded course held earlier this year. The meeting was filled to capacity. Numerous participant interviews were done and ample photographs were taken to satisfy the need for documentation of this event. A brochure was prepared using these materials and mailed to all major donors to the BOE campaign. The donors were pleased to see this tangible exhibit of what their gifts were making possible.

The 2003 Fall Course welcomed 483 participants. The Alex labs had the highest overall scores at this meeting. In regards to the focus demos, 12 of the 17 were fully subscribed. There was 100% endorsement of the format by the participants. The overall ratings were excellent. It seemed as though the removal of CME credit from the activity did not dampen the enthusiasm of the participants to take part.

Specialty day 2004 drew 1481 attendees in San Francisco. This was the largest enrolment of all the courses offered. The Communications Committee reported that the Past President profiles being featured in the AANA newsletter were going well. Streaming video material with Past President interviews was being created for future presentation on the AANA website.

An upgrade to the media used to support the Learning Center Courses had been completed at this time. These updates included: 1) New DVD for the foot and ankle course; 2) New DVD for the wrist and elbow course; and 3) The audiovisual digital conversion of the OLC was now completed. This included the hardware necessary for at a distance learning initiatives. The BOD passed a motion to increase the number of scholarship supported AANA Learning Center Courses to three in 2005.

Dr. Goradia informed the BOD that steady progress was being made in the revamping of the AANA website. He gave a live demonstration of the functional aspects of the site at the BOD meeting. The new site will include features such as: 1) Ability to register for meetings on-line; 2) Ability to pay dues on-line; 3) Ability to purchase AANA products on-line; 4) New case discussion “chat room” capability; and 5) A new look and feel.

With persistence and hard work, William R. Beach, MD and the Health Policy Committee were successful in obtaining five new CPT codes. These codes included: 1) Meniscal transplantation; 2) Arthroscopic osteochondral transplantation: autograft; 3) Arthroscopic osteochondral transplantation: allograft; 4) Open osteochondral allograft; and 5) Autogenous chondrocyte implantation.

The 2004 Annual Meeting hosted over 800 participants. There were 104 podium presentations. E-Posters were offered once again and every participant received a CD-ROM containing the E-Posters. There were 58 companies and 122 booths represented at this meeting. Research grants totaling \$75,000.00 were awarded.

Donald H. Johnson, MD remarked that he planned to continue Dr. Day’s initiative on technology. His intention was to seek prominence for AANA in information technology. He stated that he was intent on AANA “reaching out and teaching someone”. Dr. Johnson stated that he intended to continue the President’s Council as a means of developing a coordinated strategy at the leadership level.

The Finance Committee made three decisions at this meeting. These decisions consisted of:

- Recommending to the BOD that an increase in the dues of \$25.00 for each of the years 2005, 2006 and 2007 be approved.
- To recommend to the BOD placing the revenues from the increase into the General Fund.
- To recommend to the BOD discontinuing the current practice of transferring \$50.00 of each members dues to the Education Fund and furthermore to deposit these funds into the General Fund.

The AANA BOD eventually passed all the above actions.

At the time of this meeting, AANA had received acceptance letters from 33 of the 66 individuals offered Honorary Membership in AANA. Their names were added to the roster of Honorary Members. A professional needs assessment survey was scheduled to be carried out at the end of summer 2004.

AANA was officially informed by officials from Healthsouth that they would not be able to complete the pledge given to the BOE campaign. Healthsouth was listed in the donor records as a \$200,000.00 donor. A philosophical decision was arrived at during this meeting. The Executive Committee made the decision that AANA should be in a continual fund raising mode much as many universities are. This issue was to be forwarded on to the entire BOD for further discussion and input.

A new employee, Ms. Leah Anklam, was added to the AANA staff. She will begin work in mid-August 2004. Her title is Education Meeting Coordinator. A live at a distance surgical presentation was put into the plans for the 2005 Annual Meeting in Vancouver. It was announced that the journal website will be upgraded over the next year. This will create no cost to AANA. Circulation of the journal remains between 5000 and 5500 subscriptions.

The publisher informed the JBOT that they felt there was no need to increase the member's subscription cost at this time (2004-5). Therefore, there would be no increase in 2005 as had been already approved by the BOD. A possible increase in the rate is planned for 2006.

Science Direct the Institution electronic version of scientific journal bundling has tripled in revenues from 2003. *Arthroscopy* had been a part of this institutional package since 2003. Revenue from Science Direct through October 2004 was \$44,500.00, compared to \$14,107.00 in October 2003. It was considered too early to make valid projections as to where this project is headed. JBOT will watch this development with interest.

AANA passed a motion in late 2004 to create a fund named the President's Education Fund. This fund will be made available for unexpected, unbudgeted but appropriate educational expenses recommended by the President. These expenses would be subject to BOD or Executive Committee approval. No monies would be released from this fund without approval by a vote of the Executive Committee and/or the BOD of AANA. Five Learning Center shoulder courses instead of six were planned for 2005 to make room for the third resident scholarship funded course.

Ronald M. Selby, MD, Chairman of the Communications Committee, reported that eight Past Presidents have still to be interviewed on Video. It is hopeful that these interviews can be soon captured. Efforts were being made to accomplish this in the next six months.

The 2004 AANA Specialty Day meeting was attended by 1532 registrants. The 2004 AANA Annual Meeting in Orlando was attended by 912 registrants. At the end of November 2004, over 150 registrants had signed up for the January 2005 AANA winter meeting scheduled for Whistler ski resort. It was anticipated that this meeting would draw as many as 250 registrants.

As of November 30, 2004 AANA had received 250 submissions of papers for presentation at the 2005 AANA Annual Meeting. Eighty-nine (89) had been selected for presentation thus far. A newspaper containing meeting news will be produced and distributed at this 2005 meeting. This was a first for our annual meeting. Pre meeting non-CME meetings were planned on items of interest to our constituents.

The Educational Overview Committee was prepared for the December 9, 2004 onsite visit from the ACCME evaluators. There was a sense of confidence that AANA was well positioned to have a successful outcome to this rigorous but necessary evaluation of how well AANA carried out its mission over the past four years. The meeting went well and in the early spring of 2005 AANA received the result of the review. AANA received reaccreditation for 6 (six) years with commendation.